

CITY OF AUBURN
PUBLIC WORKS DEPARTMENT
ENCROACHMENT PERMIT APPLICATION EXPLANATION

Applicant must provide the following items. Check that all blanks are filled in on top half of application, except permit number. Applicant must provide three copies of a plan of the proposed work and a Certificate of Insurance (Acord Form). Please read the following carefully.

1. **NAME**: Name of individual or company responsible for work. Applicant must be consistent with person/company shown on insurance.
2. **PHONE**: Important that someone can be reached at this number or message taken.
3. **MAILING ADDRESS**: Address where permit can be sent once issued.
4. **LOCATION OF WORK**: Specific address/construction location. Lot numbers should include the subdivision name.
5. **DESCRIPTION OF WORK**: Plan, (3 copies) should include: structures, sidewalks, driveways, etc., as well as proposed construction, street names and addresses included. Also construction details should include dimensions and specify materials to be used, concrete, asphalt, etc.
6. **STARTING DATE**: Approximate date the construction is proposed. Be sure entire date is given, month/date/year.
7. **COMPLETION DATE**: Approximate date construction should be completed.
8. **PROJECT COST ESTIMATE**: This amount is an approximation of the costs of the construction in City right-of-way only.
9. **INSURANCE**: A certificate of insurance naming the City of Auburn additionally insured. The limits are \$100,000.00 each occurrence and \$300,000.00 aggregate. Reference Auburn Municipal Code Section 7-4.13.
10. **SIGNATURES**: Applicant and property owner.
11. **PERMIT NUMBER**: To be left blank. The City during the review process will issue a permit number.
12. **FEES**: 5% of project cost estimate, \$37.00/minimum.
13. **BUSINESS LICENSE**: Contractors must have a current City of Auburn business license on file prior to issuance of the encroachment permit.
14. **INSPECTION**: Call for inspection 24 hrs. in advance of construction (530) 823-4211 ext. 131.